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## Book Review **Root Canal Cover-Up Conceals Numerous Side Effects**

The Roger Wyburn-Mason and Jack M. Blount Foundation for the Eradication of  
Rheumatoid Disease  
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*George Meinig, D.D.S.*

Since the discovery of penicillin and antibiotics, root canal specialists and some physicians have come to believe infections resulting from tooth extractions, root canal work, tonsilectomies, and adnoidectomies no longer cause diseases in other parts of the body. They incorrectly claim that long-standing focal infections are a thing of the past. Most disturbing is their failure to accept the existence of the bacteria that become trapped inside the dentin tubules which make up 90 percent of the structure of teeth. Added to that fact is the inability of antibiotics and other medicaments to be able to get at and kill these organisms.

Extensive research studies in which 5000 animals took part, clearly demonstrate how these bacteria, or their toxins, escape into the circulation of the tooth's surrounding bony socket, and how these organisms are responsible for a high percentage of the chronic and degenerative disease conditions that are so epidemic in America today.

Confusing the issue is the fact that twenty-five percent of individuals who have root canal fillings (or tooth extractions) are free from trouble for extended periods of time. These are individuals who have excellent health and exceptionally good immune systems.

This groups' freedom from side effects unfortunately has led many root canal specialists to believe their treatment of infected teeth is always successful and can cause no harm.

On the other side are the 75 percent whose immune systems have been compromised by illnesses, accidents, poor nutrition, stress, etc. This group develop a variety of conditions which end up

in their going from doctor to doctor, in desperate attempts to find the cause of their problems. A high percentage of these cases are due to the bacteria coming from their root canal filled teeth, or from tooth extractions, or other foci of infection.

Once confronted with root canals, or teeth extractions, being a possible source of their illnesses, these patients often recall their health problems seemed to start right after the root canal treatment was undertaken, teeth extracted. When these infected gums are removed, many find their illnesses disappear.

To visualize what happens, picture the bacteria trapped in the dentin tubules; see them mutate and become more virulent and their toxins more toxic. In their escape into the blood circulation of the tooth's socket, these bacteria, like cancer cells, metastasize to other parts of the body. As they migrate, they infect the heart, kidneys, joints, nervous system, brain, eyes -- and can endanger pregnant women and in fact may infect any organ, gland or other tissue.

*The Root Canal Cover-up* book was compiled and written by George E. Meinig, D.D.S., F.A.C.D., one of the 19 founding members that organized the American Association of Endodontists and a former Twentieth Century Fox Studio dentist.

His book provides the public and health professionals with their first real look at the serious illnesses that can arise as a result of root canal therapy. This 7 X 10, soft cover 237 page third edition (the first and second edition sold out in record time) is available through this foundation.

## **The World's Greatest Medical Discovery**

If you heard there was a source of disease which caused literally hundreds of different illnesses, wouldn't you think that would be one of the world's greatest medical discoveries?

What will be your reaction when you learn this phenomenal work has been covered up and buried for over 70 years? Be prepared for a series of shocks. Just such a wide assortment of diseases were found and proven to come from focal infections present in infected teeth, jaws and tonsils. While these degenerative diseases could come from almost any oral infection, a high percentage come from bacteria that remain locked in root canal filled teeth. No doubt your first reaction to these words will be -- what kind of crazy man is this Dr. George to make such statements!

Stay with me for a few moments. It will be to your advantage to learn what this unfortunate cover-up is all about. It will be helpful for you to know that I was one of the 19 dentists who started the Root Canal Association now known as the American Association of Endodontists (AAE). My love affair with trying to save teeth led to graduate studies about root canal therapy from Professor Edgar Coolidge, foremost root canal researcher and teacher of the subject in the world. He was my first mentor in the field of dentistry.

It was also my good fortune to be one of the six members of his study and teaching group. Keep in mind at that time, very few dentists did root canal therapy. In fact some dental schools didn't even teach the subject.

To spread the word, Dr. Coolidge arranged for our study group to be guest speakers at numerous dental meetings. Those efforts, and those of the AAE, has resulted in some 20 million root canals now being treated each year. In my general, holistic practice of 47 years -- I did several thousand.

Four years ago I learned there had been a 25 year research program which covered all phases of root canal treatment. This was no small program; 5,000 animals were used and it was directed by Dental Research Specialist, Weston A. Price, D.D.S., M.S. The last ten years was conducted under the auspices of the American Dental Association and its Research Institute. That Research Institute was

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All of those thousands of studies and experiments were documented in two large volumes containing 1,174 pages and in more than 25 articles which can be found in the dental and medical literature.

A vast array of discoveries were forthcoming from that extensive and meticulous research which found many root canal therapy common beliefs of dentists and endodontists to be false. The most startling one clearly and emphatically demonstrated with 5,000 animal studies, that root canal filled teeth always remain infected no matter how good they look or how good they feel.

You can readily see after 47 years of practice, upon learning about all of the conclusive evidence of this discovery why I was in more of a shock than you. How in the world could it be that these vital and important revelations have been kept from the entire dental profession for over 70 years? During the last four years I have probably talked to two or three thousand dentists and have found only one who knew about Dr. Price's great discoveries.

While I knew from Dr. Coolidge's teaching that infections could be present in the lateral canals of teeth even if they appeared normal on x-ray pictures, I had no knowledge that the infection problem was so immense.

Let me get right to the heart of the problem. To do so requires that you have a little knowledge about the anatomy of a tooth. The crown of a tooth, I am sure you know, is covered by a little less than 1/4 inch of enamel. The root with 1/8 of an inch of cementum. All of the rest of the tooth (over 90 percent of it) is composed of what is called dentin.

Though the dentin is almost as hard as enamel, it is composed of tiny tubules measuring 1.5 microns, which is smaller in size than the thickness of a sheet of paper. In the normal, healthy tooth, these tubules are filled with a liquid which contains nutrients.

Running through the center of the tooth is the root canal. Everyone knows it contains a nerve. Many are not aware that it also contains an artery, vein, and other tissue. As the blood flows through the artery every day and night, it drops nutrients into the fluid in each of those dentin tubules -- the same way blood vessels drop nutrients into each cell of the body. The nutrients present in those tubules travel to all parts of the tooth. That is the real hidden secret about what keeps teeth alive and healthy.

When we get a small cavity in a tooth which is just breaking through the enamel into the dentin, the bacteria that are part of the decay process get into the tubules in the vicinity of the decay area. Dentists in cleaning out the decay quite readily stop the process.

The problem arises when the person doesn't go to their dentist regularly and that tiny cavity becomes a deep one. Once the decay gets so deep that it penetrates into the root canal itself, the bacteria present in the decayed tooth substance enter the canal and quickly travel it down to the end and then out of the apex of the root into the surrounding bone. Along the way, they spy those dentin tubules and their nutrient food content.

They find those tubules are excellent new home sites. Herein lies the problem. Dentists, in doing root canal treatment, feel they adequately kill the bacteria that are present, but are unaware that the medications they use cannot penetrate into those tiny tubules far enough to kill them. Most dentists are entirely unaware of the bacteria in the tubules, and the fact that hundreds of experiments showed not a single one of over 100 commonly used disinfectants could penetrate those tubules.

When we confront dentists with these facts they often will say, "So what? When we place the root canal filling, the organisms will die off." Here again their opinion is incorrect as they are unaware that these bacteria are polymorphic, which means they can mutate

and change form and are able to actually live under the most severe, adverse conditions. [See *Cell-Wall Deficient Forms*, <http://www.arthritistrust.org>.]

Undaunted, your dentist will now say, "What difference does it make? The germs can't escape because the root canal filling blocks them out" That too is untrue, as the bacteria can readily escape from the lateral, accessory root canals present in all teeth. Not only that, the toxins formed by bacteria can escape right through the cementum of the tooth. In another series of intelligent experiments, Dr. Price showed that the hard cementum outer covering of the roots was actually a semi-permeable membrane. That means liquid substances like bacteria toxins could travel right through the cementum and escape into the periodontal membrane which holds the tooth in its bony socket. It is that membrane which attaches the tooth to the jaw bone and keeps teeth from falling out.

The periodontal membrane is a hard fibrous tissue but it has a blood supply and the bacteria and their toxins now infect it. From there, the organisms and their toxins have easy access into the surrounding jaw bone and its blood supply. It is similar to cells breaking away from a cancer lesion and metastasizing and setting up a new cancer some other place in the body. These bacteria from teeth and their toxins also metastasize via the blood stream. In their travels when they find a gland, organ or body tissue that appears attractive, they make it their new home and promptly set up a new infection. This eventually results in a degenerative disease.

Now that you know the source of the problem, let me tell you about how a rabbit revealed the actual devastation that occurs.

Dr. Price had treated a root canal infection for a patient who subsequently developed a severe case of arthritis in her hands and legs. He was well aware that physicians in trying to discover the cause of a disease would isolate the bacteria, grow them in culture, and then inject the organism into animals to see if they could reproduce the disease and subsequently find a cure.

At that particular moment, Dr. Price did not know just where the infection was in the tooth, but in thinking how doctors were discovering the causes of diseases, he thought of a similar way that might lead to an answer. After a little trouble he convinced the patient to let him remove the tooth. He washed and bathed it in a disinfectant. He then made a small buttonhole incision in the skin of the back of a rabbit, inserted the extracted root canal tooth, placed a couple of stitches so it wouldn't fall out, and returned the animal to its spacious cage and waited developments.

It didn't take long. In just two days the rabbit's limbs had developed the same arthritic swelling as that of the patient and in ten days it died from the infection coming from that tooth.

Now, Dr. Price immediately thought of all those patients he had who were suffering from heart, kidney, liver, joint disease, eye problems, etc., etc., and he wondered if their root canals were the source of their degenerative health problems. Those who had root canals he suggested their removal and he implanted them under the skin of an animal.

What happened was surprising and unexpected. In the vast majority of cases the animal developed the same disease as the patient and most passed away in from two or three days to a week or two from the infections present in the root canal treated teeth. Different kinds of animals were used: Rats, Guinea pigs, dogs and monkeys, but it didn't matter, the same results occurred. They usually used rabbits as they seemed to react a bit more promptly and proved the better choice for such studies.

Early on in his studies Dr. Price made some reports of his research in articles which appeared in medical and dental journals. A number of dentists came to him voicing the opinion that any animal would likely get sick and die with an extracted tooth in its

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body. Dr. Price admitted he didn't know the answer to that question but he said let's find out. What he did was to have a group of dentists secure 100 healthy teeth. These were removed for orthodontic purposes, or impacted teeth, none of them had any tooth decay or gum trouble. He placed each single tooth under the skin of a different animal.

Well, not a single one of those 100 animals got sick or died. All lived their normal life span with the tooth under its skin. In a few, their immune systems were strong enough to expel the tooth out through the skin and in a few the tooth dissolved away. They even did bacteriologic studies of the tissue around the imbedded teeth and always found them to be sterile.

It is always a surprise to learn that Dr. Price's work was buried for over 70 years. Of course, there is the obvious objection of dentists not wanting to lose this part of their income. Actually there were a half dozen or more reasons why his work was covered up and buried. That will have to wait for another time because of space limitations.

I can assure you, hardly a dentist in the country has ever heard about this 25 year extensive and meticulous research program. The Endodontic Association says they teach about Dr. Price in dental schools, but it is strange I never find any dentists who have ever heard about it.

The AAE isn't very happy with me exposing this cover-up and they claim the focal infection theory was proven false years ago, but so many investigators have proven the accuracy of the theory, that it is unbelievable they stick to that old claim that helped bury Dr. Price's work. That story too will need to wait for another day.

I had hoped by now they would set up research to investigate the bacteria in the dentin tubules as these infections prove to be so devastating. The AAE has numbers of research projects but they have not as yet faced this critical issue.

#### **Editor's Comments**

If you have a root canal or been told you need one, your best approach is to learn all you can about this subject. See *Root Canal Cover-Up*, <http://www.arthritistrust.org>. It is written in lay language and covers the major issues covered in Dr. Price's two volumes of 1,174 pages of documentation. Even if you don't have a root canal treated or extracted tooth it is worthwhile to learn about what is taking place in so many people and how these degenerative diseases can be prevented.

An extracted tooth can cause the same problems as does the infected root canal. The executive director of this foundation found that he had sustained a 50 year long, hidden, unknown infection in upper and lower gums from having had teeth extracted 50 years ago via the Veteran's Administration.

Also a word of caution: as with the problems of mercury poisoning from mercury amalgam fillings in teeth (another sad story to be told), it's not easy to find a "biological dentist" trained in its safe removal. Removing mercury amalgams in the wrong manner can result in more harm than the mercury fillings to be replaced.

A specially trained and knowledgeable dentist (biological dentist) can use non-invasive means to determine the source of root canal or tooth extraction infection, after which surgery may be required accompanied by proper sterilization techniques. Even then, follow-up checks may be required. The Price-Pottenger Nutrition Foundation, PO Box 2614, Las Mesa, CA 91943-2614; (619) 462-7600 may help you find your nearest biological dentist. Sad to say, as critical and important as a biological dentist is to achieving wellness, it's been the editor's experience that they are usually few and far from our home stations.